UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF NEW YORK	
In re	: Chapter 11 Case No.
LEHMAN BROTHERS HOLDINGS INC., et al.,	: 08-13555 (JMP)
Debtors.	: (Jointly Administered)
WITHDDAWALO	F CLAIM

Debtor Name and Case Number:	Lehman Brothers Holdings Inc. (08-13555)
Creditor Name and Address:	MetLife Reinsurance Company of Charleston c/o Metropolitan Life Insurance Company P.O. Box 1902 10 Park Avenue Morristown, NJ 07962-1902 Attn: Jane J. Dickson, Esq
Claim Number (if known):	65995
Date Claim Filed:	12/23/09
Total Amount of Claim Filed:	\$40,453,498.34

I, the undersigned, am the above-referenced creditor, or an authorized signatory for the above-referenced creditor. I hereby withdraw the above-referenced claim and authorize the Debtors' claims and noticing agent to file and reflect this withdrawal on the official claims register for the above-referenced Debtor.

Signature:	Title:
blom Ilm	Director
Printed Name:	Dated:
Ronald Nirenberg	September 9, 2011